

## **Program A: Administration and General Support**

### **OBJECTIVES AND PERFORMANCE INDICATORS**

Unless otherwise indicated, all objectives are to be accomplished during or by the end of FY 2002-2003. Performance indicators are made up of two parts: name and value. The indicator name describes what is being measured. The indicator value is the numeric value or level achieved within a given measurement period. For budgeting purposes, performance indicators are shown for the prior fiscal year, the current fiscal year, and alternative funding scenarios (continuation budget level and Executive Budget recommendation level) for the ensuing fiscal year of the budget document.

The objectives and performance indicators that appear below are associated with program funding in the Base Executive Budget for FY 2002-2003. Specific information on program funding is presented in the financial section.

DEPARTMENT ID: 09 - Department of Health and Hospitals  
 AGENCY ID: 09-319 - Villa Feliciana Medical Complex  
 PROGRAM ID: Program A - Administration and General Support

1. (KEY) To maintain the Centers for Medicare and Medicaid Services (CMS) certification for participation in long-term care reimbursement programs through 95% standard compliance.

Strategic Link: This objective implements Goal 1, Objective I.1 of the Strategic Plan: To maintain the Centers for Medicare and Medicaid Services (CMS) certification for participation in the long term care reimbursement programs through 95% standards compliance through FY 2006.

*Louisiana: Vision 2020* Link: Goal Three: To have a standard of living among the top ten states in America and safe, healthy communities where rich natural and cultural assets continue to make Louisiana an unique place to live, work, visit, and do business.

Children's Cabinet Link: Not Applicable

Other Link(s): Healthy People 2010: Goal 1, Objective 15 in Healthy People 2010 links in a general way to the operations of Villa Feliciana Medical Complex: Increase the proportion of persons with long term care needs who have access to the continuum of long-term care services.

Explanatory Note: This indicator reflexes the annual survey done by DHH - Health Standards at the facility. The percentages of compliance reflect the deficiencies of total number of served areas surveyed.

L E V E L	PERFORMANCE INDICATOR NAME	PERFORMANCE INDICATOR VALUES					
		YEAREND PERFORMANCE STANDARD FY 2000-2001	ACTUAL YEAREND PERFORMANCE FY 2000-2001	ACT 12 PERFORMANCE STANDARD FY 2001-2002	EXISTING PERFORMANCE STANDARD FY 2001-2002	AT CONTINUATION BUDGET LEVEL FY 2002-2003	AT RECOMMENDED BUDGET LEVEL FY 2002-2003
K	Percent compliance with CMS Long Term Care standards <sup>1</sup>	95%	99%	95%	95%	95% <sup>2</sup>	95%

<sup>1</sup> Changed performance indicator name to more accurately describe this indicator. Formerly "Percentage compliance with HCFA license and certification standards." Calculation remains the same. Also, Health Care Financing Agency (HCFA) has been renamed the Centers for Medicare and Medicaid Services (CMS).

<sup>2</sup> This standard was set because of the age of the facility and history of inspections.

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GENERAL PERFORMANCE INFORMATION:					
PERFORMANCE INDICATOR NAME	PERFORMANCE INDICATOR VALUES				
	PRIOR YEAR ACTUAL FY 1996-97	PRIOR YEAR ACTUAL FY 1997-98	PRIOR YEAR ACTUAL FY 1998-99	PRIOR YEAR ACTUAL FY 1999-00	PRIOR YEAR ACTUAL FY 2000-01
Percentage compliance with CMS Long Term Care standards	100%	100%	100%	99%	99%
Number of standards	513	513	513	513	533 <sup>1</sup>

<sup>1</sup> This is the denominator for the performance indicator "Percentage compliance with CMS Long Term Care standards." This is the number of survey standards in the CMS State Operations Manual for Long Term Care.